

**Norridge Police Department**

**Accident Review Board**

Date assigned	Member	Present	Excused	Unexcused
5/1/2003	Sgt.Orlando	x		
7/15/2016	Cpl. Wendt	x		
10/01/16	Off. Smith		x	
5/1/2003	Off. Malicki	x		

Review Date: 01/06/2017

M/V Crash 2016-15082

Officer: Off. Ljubicic #34

Squad #516

**1. Classification I.**

- a. The incident was NON-PREVENTABLE and the employee was not at fault. Caution was apparently excercised.
- b. The employee was legally parked or standing.
- c. The employee was aware of the impending hazard, was alert to the consequences and skillful in minimizing the effect of the hazard.
- d. In incidents the board resolves to be Classification I, no disciplinary action will be taken.

**2. Classification II.**

- a. The employee failed to exercise reasonable and due care.
- b. The employee deviated inexcusably from Dept. Rules and Regulations, Procedures and/or General Safety Practices.
- c. procedures and/or general safety practices.
- c. In incidents the board resolves to be Classification II, disciplinary action recommended may be:
  - (i) For the very first incident of record for the employee in a rolling 24 month period, a letter of reprimand will be issued and attendance and successful completion of a "Defensive Driving Course may be ordered. Only one letter of reprimand may be issued during the 24 month period in which the incident occurred.
  - (ii) For a second Classification II finding by the board in the 24 month period a 2 day suspension without pay shall be imposed.
  - (iii) For a third Classification II finding by the board in a 24 month period, a 3 day suspension without pay shall be imposed.

Recommendation: The board unanimously agreed 2a. Off. Ljubicic hit a fixed object.

## ILLINOIS TRAFFIC CRASH REPORT

Sheet 1 of 1 Sheets

DRAC		PEDV	TRFD	TRFC	WEAT	DRVA	VIS	VEHD	LGHT	COLL	MANV	PPA	PPL
U1	/	/	/	/	/	99	U1	/	1	15	1	99	99
U1	U2						U2	U1	U1	U2	U1	U2	U1

\*P0113\*

X U 1 3 0 2 7 7 8 1 1 \*

## INVESTIGATING AGENCY

NORRIDGE POLICE DEPT.

DAMAGE TO ANY  
ONE PERSON'S  
VEHICLE / PROPERTYTYPE OF REPORT  
ON SCENE  
NOT ON SCENE (DESK REPORT)  
AMENDEDEA No Injury / Drive Away  
B Injury and / or Tow Due To Crash

AGENCY CRASH REPORT NO.

16 15082

TRFW

8

## ADDRESS NO.

## HIGHWAY or STREET NAME

4020

N. OLcott AVENUE

City NORRIDGE

Township

Intersection  
RELATED

Y

IN

DATE OF CRASH  
mo 12 day 29 yr 16TIME  
2:39 AM

PM

LARS CODE

VEHT  
U1 15

(CIRCLE) FT / MI N E S W

(CIRCLE) AT INTERSECTION WITH

(NAME OF INTERSECTION OR ROAD FEATURE)

COUNTY

Cook

PROPERTY

Y

N

DOORING  
WITH  
PEDALCYCLIST

Y

IN

HIT &amp; RUN

Y

IN

NUMBER MOTOR  
VEHICLES INVLD

1

LARS CODE

99  
U2NAME  DRIVER  PARKED  DRIVERLESS  PED  PEDAL  EQUES  NMV  NOV DATE OF BIRTH

MAKE

MODEL

YEAR

CIRCLE NUMBER(S)  
FOR DAMAGED AREA(S)

FRONT

Y

N

12

TOWED  
DUE TO CRASH

FIRE

CELLPHONE

EXCEED  
SPEED LIMIT

COM VEH

\* IF YES SEE SIDEBAR

(LAST, FIRST, MI) LJUBICIC, ZELJKA

PLATE NO.

STATE

YEAR

00 - NONE

10 - UNDER CARRIAGE

11 - TOTAL (ALL AREAS)

12 - OTHER

99 - UNKNOWN

POINT OF

FIRST CONTACT

8

FRONT

1

2

3

4

5

6

7

8

REAR

STREET ADDRESS

4020 N. OLcott AVENUE

CITY

NORRIDGE

STATE

IL

ZIP

60706

INJURY

0

EJECT

1

VIN

IFM5K8AR3EGA38330

TELEPHONE

(708)453-4770

DRIVER LICENSE NO.

IL

CLASS

STATE OWNER (LAST, FIRST M.I.)

VILLAGE OF NORRIDGE

INSURANCE CO. UNDERWRITERS AT  
LLOYDS OF LONDON (IL)

POLICY NO. BGP10005404

TAKEN TO

N/A

EMS AGENCY

N/A

OWNER ADDRESS (STREET, CITY, STATE, ZIP)

14020 N. OLcott AVE, NORRIDGE, IL. 60706

TELEPHONE

(708)453-4770

YEAR

10

11

12

13

14

15

16

17

18

NAME  DRIVER  PARKED  DRIVERLESS  PED  PEDAL  EQUES  NMV  NOV DATE OF BIRTH

MAKE

MODEL

YEAR

CIRCLE NUMBER(S)  
FOR DAMAGED AREA(S)

FRONT

Y

N

12

TOWED  
DUE TO CRASH

FIRE

CELLPHONE

EXCEED  
SPEED LIMIT

COM VEH

\* IF YES SEE SIDEBAR

(LAST, FIRST, MI)

STREET ADDRESS

SEX

SAFT

AIR

PLATE NO.

STATE

YEAR

CITY

STATE

ZIP

INJURY

EJECT

VIN

TELEPHONE

DRIVER LICENSE NO.

STATE

CLASS

VEHICLE OWNER (LAST, FIRST M.I.)

INSURANCE CO.

POLICY NO.

TAKEN TO

EMS AGENCY

EMSS

OWNER ADDRESS (STREET, CITY, STATE, ZIP)

TELEPHONE

POLICY NO.

(UNIT) (SEAT)

(DOB)

(SEX)

(SAFT)

(AIR)

(INJ)

(EJCT)

PASSENGERS &amp; WITNESSES ONLY (NAME) / (ADDR) / (TEL)

(HOSP)

(EMS)

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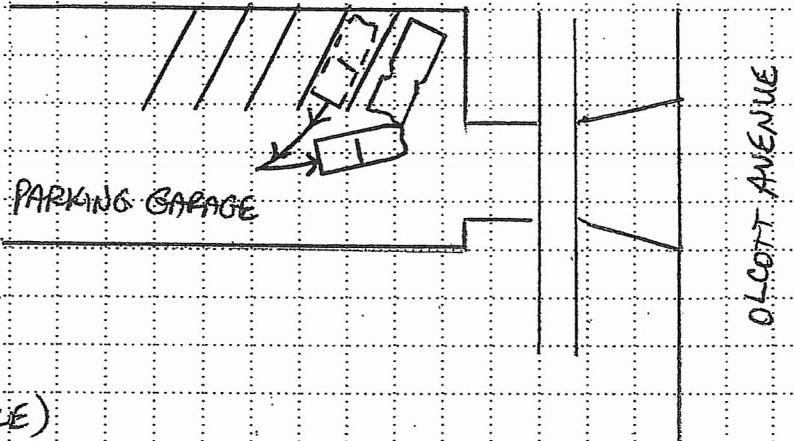
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U130277811

A Diagram and Narrative are required on all Type B crashes,  
even if units have been moved prior to the officer's arrival.

4020 N. OLcott AVE.



(DIAGRAM NOT TO SCALE)

## NARRATIVE (Refer to vehicle by Unit No.)

**IN SUMMARY: DRIVER OF UNIT 1 RELATED THAT SITE BACKED HER UNIT SOUTHWEST BOUND OUT OF A PARKING SPACE AT 4020 N. OLcott AVENUE. DRIVER OF UNIT 1 RELATED THAT SITE THEN PULLED FORWARD EASTBOUND WHEN THE DRIVER'S SIDE BUMPER OF UNIT 1 STRUCK THE DRIVER'S SIDE FRONT OF A KUBOTA SNOW TRACTOR PARKED TO THE EAST OF WHERE UNIT 1 HAD BEEN PARKED. THERE WERE NO REPORTED INJURIES.**

LOCAL USE ONLY

U1 Color BLACK	U2 Color N/A
U1 Towed by / to N/A	U2 Towed by / to N/A

## COMMERCIAL MOTOR VEHICLE (CMV)

IF MORE THAN ONE CMV IS INVOLVED, USE SR 1050A ADDITIONAL UNITS FORMS.

A CMV is defined as any motor vehicle used to transport passengers or property and:

1. Has a weight rating of more than 10,000 pounds (example: truck or truck/trailer combination); or
2. Is used or designed to transport more than 15 passengers, including the driver (example: shuttle or charter bus); or
3. Is designed to carry 15 or fewer passengers and operated by a contract carrier transporting employees in the course of their employment (example: employee transporter - usually a van-type vehicle or passenger car); or
4. Is used or designated to transport between 9 and 15 passengers, including the driver, for direct compensation (example: large van used for specific purpose); or
5. Is any vehicle used to transport any hazardous material (HAZMAT) that requires placarding (example: placards will be displayed on the vehicle).

CARRIER NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

USDOT NO. \_\_\_\_\_ ILCC NO. \_\_\_\_\_

Source of above info.  Side of Truck  Papers  Driver  Log Book

Gross Vehicle Weight Rating (GVWR) \_\_\_\_\_

Were HAZMAT placards displayed on the vehicle?  Y  N

If yes, name on placard \_\_\_\_\_

4-digit UN no. \_\_\_\_\_ 1-digit Hazard Class no. \_\_\_\_\_

Did HAZMAT spill from the vehicle (do not consider fuel from the vehicle's own tank)?  Y  N  UNKDid HAZMAT Regulations violation contribute to the crash?  Y  N  UNKDid Motor Carrier Safety Regulations (MCS) violation contribute to the crash?  Y  N  UNK

Was a Driver/Vehicle Examination Report form completed?

HAZMAT  Y  N  UNK Out of Service?  Y  NMCS  Y  N  UNK Out of Service?  Y  N

Form No. \_\_\_\_\_

IDOT PERMIT NO. \_\_\_\_\_ WIDE LOAD?  Y  NTRAILER WIDTH(S): 0'-96"  97-102"  >102"TRAILER 1   TRAILER 2   

TRAILER LENGTH(S): 1 \_\_\_\_\_ ft TRAILER 2 \_\_\_\_\_ ft

TOTAL VEHICLE LENGTH \_\_\_\_\_ ft NO. OF AXLES \_\_\_\_\_

SELECT CODES FROM BACK COVER OF CRASH BOOKLET:

VEHICLE CONFIGURATION \_\_\_\_\_

CARGO BODY TYPE \_\_\_\_\_ LOAD TYPE \_\_\_\_\_



## NORRIDGE POLICE DEPARTMENT



## Employee Warning Notice

Name: Zejka Ljubicic

Star #: 34

Date: January 16, 2017

## TYPE OF VIOLATION

Attendance	Carelessness	Insubordination	Late Arrival/Early Quit
Failure to Follow Instructions	Rudeness Towards Citizens	Willful Damage to Equipment	Personal Business While on Duty
Unsatisfactory Work Performance	Violations of Policy/Procedure	X Motor Vehicle Crash	Missing a Court Date

Date of Violation: December 29, 2016

Time of Violation: 1439

## DESCRIPTION OF VIOLATION:

Officer Ljubicic was involved in a "preventable property damage crash as determined by the accident review board. Accident review board classified the crash a 2a, in that the officer failed to exercise reasonable care. (16-15082) Struck a parked snow throwing vehicle .

## OFFICER'S STATEMENT:

I agree with the above description       I disagree with the above description

My reason is:

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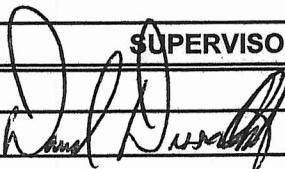
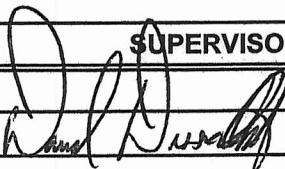
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Officer's Signature

Star #

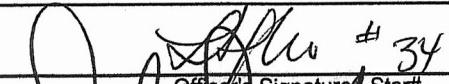
Date

ACTION TAKEN		DATE	SUPERVISOR NAME & STAR
	Verbal Warning		
X	Written Warning	01/16/17	
	Disciplinary Write-up		

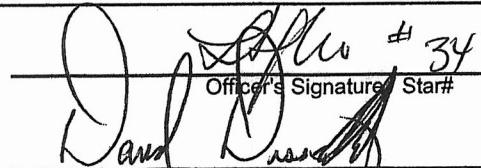
## CONSEQUENCES IF VIOLATION OCCURS AGAIN:

Per Department policy, a second violation within the next 24 months of the date of this violation will result in a 2 day suspension.

I have read and understand this warning;

  
Officer's Signature / Star#1/20/2017  
Date

Supervisor Issuing Warning:

  
Supervisor's Signature / Star #1/20/2017  
Date